



**STATE OF CONNECTICUT
DEPARTMENT OF CHILDREN AND FAMILIES**

Public Hearing Testimony

**Program Review & Investigations Committee
March 4, 2014**



***H.B. No. 5371 AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE LEGISLATIVE
PROGRAM REVIEW AND INVESTIGATIONS COMMITTEE STUDY ON ACCESS TO SUBSTANCE USE
TREATMENT FOR INSURED YOUTH AS THEY RELATE TO THE DEPARTMENT OF CHILDREN AND
FAMILIES.***

The Department of Children and Families offers the following comments regarding H.B. No. 5371, An Act Implementing the Recommendations of the Legislative Program Review and Investigations Committee Study on Access to Substance Use Treatment for Insured Youth as They Relate to the Department of Children and Families. We appreciate the thoughtful analysis of the Committee and their professional staff in preparing this report.

Section 1 of this legislation would require DCF, the Department of Mental Health and Addiction Services (DMHAS) and the Department of Public Health to develop a proposal to establish an urgent care center for individuals with behavioral health concerns to be operated by both public and private entities. DCF is willing to work with our sister agencies to develop such a proposal but would suggest a more cost-effective approach may be to suggest that agencies develop a plan to improve coordination of existing resources and identify options to address service gaps in the area of substance abuse treatment for youth and adolescents.

Section 2 requires DCF to compile information regarding private insurance coverage for youth receiving voluntary services from the Department. While we agree that compiling the data suggested in the bill would be beneficial, we're concerned that imposing such a requirement on our contracted providers may go beyond the scope of our current contracts. We're also concerned that we currently lack the resources to analyze the data and report back to the General Assembly the results of such analysis.

Finally, section 3 requires DCF and DMHAS to develop a substance abuse recovery support plan to provide services to adolescents and young adults. DCF is prepared to collaborate with our colleagues at DMHAS to develop such a plan.

***H.B. No. 5374 AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE LEGISLATIVE
PROGRAM REVIEW AND INVESTIGATIONS COMMITTEE STUDY ON THE DEPARTMENT OF
CHILDREN AND FAMILIES AS THEY RELATE TO PREPARATION OF YOUTHS AGING OUT OF
STATE CARE***

The Department of Children and Families **supports** H.B. No. 5374, An Act Implementing the Recommendations of the Legislative Program Review and Investigations Committee Study on the Department of Children and Families as They Relate to Preparation of Youths Aging Out of State Care.

As you know, DCF participated in the Program Review and Investigations Committee's study of youth aging out of state care. We commend the professionalism and effort of the Committee staff, and we concur with many of the dozens of recommendations contained in the final study report. Attached to our testimony is our response to the staff recommendations.



Joette Katz
Commissioner

DEPARTMENT of CHILDREN and FAMILIES
Making a Difference for Children, Families and Communities



Dannel P. Malloy
Governor

March 3, 2014

Attorney Carrie E. Vibert, Director
Legislative Program Review and Investigations Office
State Capitol, Room 506
Hartford, CT 06106

Dear Attorney Vibert:

Thank you for the opportunity to respond to the study performed by your office: *Youth Aging out of Care*. We appreciate the work of Michelle Castillo, and the time and effort she took to meet with our staff, and understand our programs and services.

There were a number of recommendations made in the report, and I am directing my staff members to explore those recommendations, and will make our findings part of the report the committee has requested by the committee.

In this letter, I am including some clarifications made by my staff members who participated in the data collection portion of the study. I believe these clarifications will strengthen understanding of The Department of Children and Families' (DCF's/Department's) performance in this important area. The clarifications are as follows:

1. Medical coverage

"DCF should consider implementing the recommendations proposed by Connecticut Voices for Children to ensure continued Medicaid coverage."

Agency Response:

DCF has addressed the *Affordable Care Act (ACA)* mandate to cover all youths who were in foster care at age 18 and who were on Medicaid, until their 26th birthday. The strategies include:

The Department of Social Services (DSS) has established an eligibility category (MO9) for foster care youths who qualify under the ACA. For those young adults, age 18 or older, who leave care beginning on the day that the legislation took place (January 1, 2014), DCF is notifying DSS of these youths and DSS is

STATE OF CONNECTICUT
Phone (860) 550-6300 - Fax (860) 560-7086
505 Hudson Street, Hartford, Connecticut 06106-7107
E-Mail: commissioner.dcf@ct.gov
www.ct.gov/dcf
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converting their eligibility category to MO9. Because these youths, as long as they live in Connecticut, are categorically eligible for Medicaid through their 18th birthday, DCF has also eliminated the need for the youth to engage in their own annual redeterminations. We have taken on this responsibility of annual redeterminations for this population.

For those youths who left DCF care prior to January 1, 2014 and who are not yet 26, DCF is communicating to youth service counsels and using social media as a means of alerting these youths of their ability to obtain medical coverage through their 26th birthday. These youths must apply via DSS' accesshealthct website. There is a question on the website application, asking the youth if he/she was ever in foster care. There is a supplemental paper application, and DCF has requested that DSS add this question to the paper application. DSS will provide DCF with the names of those individuals who reply in the affirmative, and DCF will confirm if the youth was in foster care when he or she turned 18, and if he or she was on Medicaid at that time. For those youths who qualify, DSS will provide them with MO9 coverage.

2. Data Collection

"The statutorily mandated cost analysis report on the federal Fostering Connections should be completed and results released to legislative committees as required by P.A. 13-234."

Agency Response:

We believe this release to be imminent.

3. Transition to Other Systems of Care -

- a. Department of Mental Health and Addiction Services (DMHAS) section: The graph illustrating the number accepted in FY 13 - it should be noted that all the eligibility determinations were not completed for that FY by DMHAS
- b. Department of Developmental Services (DDS) section:
 - i. Clarification in the first paragraph: DCF provides names to DDS annually for potential transfer from the DCF to the DDS Voluntary program. DCF and DDS work together to maintain a shared client list which includes all the individuals who have open DCF cases and have also been found eligible for DDS. This list is shared with DDS quarterly.

Adaptive behavior and functional skills are used by DDS to determine eligibility regardless of intellectual disability level (below 70 and at or around 70). When scores are close to 70, that is when the adaptive scores can make a big difference in whether the individual is found to be eligible.

- ii. Clarification in the second paragraph: This paragraph describes the re-determination process that applies only to youth ages 16 – 18 who have a mild intellectual disability designation.
 - iii. Clarification in the third paragraph: In some cases, DCF may do a simultaneous referral to DMHAS and DDS for someone who has a Pervasive Developmental Disorder (PDD) diagnosis - it depends on what other diagnoses they have and their status with DCF. DCF can only refer individuals to the DDS Autism program who are part of the DCF Voluntary Program.
 - iv. Clarification in the fifth paragraph: DDS may not provide the exact same services as DCF because they have a different service and rate structure. In some cases they have to “translate” what DCF is providing into a service package that works within the DDS system.
- c. "An appropriate care plan must be in place prior to transition of a DCF youth into another system of care."

Agency Response:

DMHAS prepares a Transition Action Plan (TAP) for each youth who is transitioning from DCF to DMHAS. DCF began monitoring completion of TAP in July 2013; therefore data was not available to provide to PRI at the time the study was conducted. It is clear in the MOA that a youth needs to have a transition plan and this continues to be a priority for DCF, and the monitoring has been added by DCF Central Office. In addition, DCF also performs its regular case planning process, which would include transition planning information.

- d. "The memorandum of agreement (MOA) between DCF and DDS should be modified to include provisions regarding maintaining a centralized process for referral receipt, eligibility determination, and transition planning."

Agency Response:

Unlike DMHAS, referrals to DDS can be made at any age and do not require DCF involvement. There are always referrals made prior to DCF involvement and thus not easily tracked by DCF. If DCF were to centralize the DDS referral process, data would not be available on all clients without a special agreement with DDS

to share this data on an ongoing basis. Otherwise, there will always be a number of children who DCF cannot track.

This recommendation also discusses centralization of transition planning. This will take some careful consideration. This merits careful consideration as it will require additional staffing resources, as well as increased coordination.

e. "Collaboration between DCF and DMHAS should continue on the Learning Inventory of Skills Training (LIST) program."

Agency Response:

DCF is very interested in expanding the Life Skills initiative to all youth transitioning to DMHAS throughout the DCF system. The current LIST process was implemented in one DCF Area Office as part of a pilot project that was developed collaboratively with DMHAS. In order to implement the use of the LIST, DMHAS allowed their Occupational Therapists to provide the training to DCF staff. DMHAS has indicated that they do not have staff resources to provide this training for all DCF Area Offices in order to implement the LIST on a statewide basis. Therefore, identifying resources for staff training and statewide implementation will be necessary to expand the project.

f. "Improvements should be made to ensure better data-sharing occurs in a timely fashion for youth transitions to DMHAS and DDS."

Agency Response:

It would be helpful to have some additional discussion with PRI staff to better understand this recommendation and if they had any specific things in mind in terms of our review and discussion with DDS and DMHAS.

4. Improving High School Educational Attainment

'DCF should track and monitor provisions relating to school transfers and remaining in the same school of origin pursuant to C.G.S. Section 17a-16a.'

Agency Response:

DCF is attempting to obtain historical school data to assess school stability.

"To assist incorporating education goals into case plans, DCF's educational consultants should develop a checklist to ensure educational needs and potential Post-Secondary Education (PSE) requirements are met. The checklist should be specific to the youth's age/year in school and be reviewed every six months during administrative case reviews.'

Agency Response:

A plan to ensure substantive educational information in case plans and reports to the Court is currently being finalized by DCF leadership.

"Schools districts should be required to report in their strategic school profiles the number of DCF committed youth they are serving with and without special needs, the academic progress of these youth, and the percentage who have success plans and individual transition plans."

Agency Response:

We believe an even stronger requirement would be to mandate that the school notifies DCF of suspensions and other issues that place a child at risk of getting expelled.

5. Work Readiness Activities

"DCF should offer career assessments to assist youth explore various career paths and support other career preparation activities such as online research, attendance at career fairs, speaking to a career counselor, or arranging a visit to a work site or job shadowing."

Agency Response:

The responsibility for Work Readiness is shared by local school districts and the Department of Children and Families. By law, public schools are to assist each student in grades 6 through 12 in the development of a Student Success Plan which describes the student's intentions for career and/or further education beyond high school, along with the steps that the student should take in middle and high school to pursue those plans. Education Consultants and Specialists in the DCF Education Division monitor the SSP process for youths committed to the care of the Department as a part of the records acquisition and review process. In addition, the Individuals with Disabilities Education Act (IDEA) require schools to develop transition plans for all special education students as part of the Individual Education Plan (IEP) process.

The agency through its division of Adolescent and Juvenile Justice Services offers a variety of programs for both the child welfare and juvenile justice populations. This service continuum is designed to develop their work skills as well as explore their career interest(s). These services include but are not limited to; the JJ Vocational Development program, Fostering Education Employment and Responsibility (FREE) , Work to Learn programs throughout the state, the Career Pathways Collaborative, Summer youth employment as well as trade schools, community colleges and 4 year universities. Youth are also taken on college tours to historic black colleges and universities (HBCU); and colleges throughout the northeast. DCF also arranges factory tours to expose youth to the semi skilled and skilled labor market. The department now offers a comprehensive scholastic test

battery in the service of matching youth to careers where they are mostly likely to find success based on their profile. The department will now make this assessment a requirement for all 15 year olds as we begin planning for them in the 10th grade.

The services the agency offers are comprehensive but evolve from one year to the next as we adapt to the changing needs of the youth in our care.

"Upon completion of the two-year Raise the Grade Pilot, the program should be evaluated and modified as needed to be extended to the entire state."

Agency Response:

The evaluation would be more useful if it could begin and be designed while the program exists, thereby providing the legislature with information prior to the end of the program.

6. Work to Learn

When DCF submitted its response to the PRI data request, we indicated that the budget figures for the Work-to-Learn program were working estimates.

The correct budget figures for the Work-to-Learn are:

	SFY 11	SFY 2012	SFY2013
Total DCF Work To Learn	2,445,766	2,563,167	2,774,014

Thank you, again, for this opportunity to respond to this important study. I welcome any questions you may have about this response.

Sincerely,

Joette Katz,
Commissioner